

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2023OY001
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Name of Service:	Memory Lane Pre-school
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Address of Service:	12 The Sycamores, Edenderry, Co. Offaly
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Eircode:	R45 A525
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Name of Registered Provider:	Caroline Pierce
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Service type:	Full Day, Sessional
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Date of Inspection:	26/05/2026
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No of pre-school children:	AM	35	PM	11
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Address of the Early Years Inspectorate:	Early Years Inspectorate, SAP Office, St Loman's Campus, Springfield, Mullingar, Co Westmeath, N91 N4XC.
Inspection undertaken by:	T. Duignan and F. Maher
Title:	Early Years Inspectors

Authority to Inspect

The Tusla Early Years Inspectorate carries out inspections of Early Years Services under Section 58(J) of the Child Care Act 1991 (as inserted by Section 92 of the Child and Family Agency Act 2013).

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Description of service

Memory Lane pre-school is one of two preschool services operated by the registered provider. It is a full day care service, which also provides part time and sessional care. The service is located in a housing estate in the town of Edenderry, Co. Offaly. The service caters for children in the age range from 2 to 6 years and operates from 7.30 am to 18:00 hours from Monday to Friday. The premises was originally purpose built and designed for sole use as an early years' service. Part of this premises is now used as a domestic dwelling. The remainder is used for the purpose of carrying on an early years' service.

The part of the premises used as an early years' service has an entrance hall, two care rooms, the larger room known as Room 1 is also used as a sleeping facility and the office. There are three toilets and a nappy changing facility.

Parking and set down for parents are available on the public road.

Staffing

The service employs eight adults including the registered provider.

Five staff members were present initially on the day of the inspection. The registered provider arrived after the inspection had commenced and remained for the duration of the inspection. Of the six adults present, the registered provider and the adult employed as the supervisor, provided support in the service where necessary, and four adults were working directly with the children attending the service.

All staff members held a major award in Early Childhood Care and Education on the National Framework of Qualifications.

Methodology

Tusla's Early Years Inspectorate is the independent statutory regulator of early years services in Ireland. The Child Care Act 1991 (Early Years Services) Regulations 2016 define the duty of a registered provider to ensure the safety and well-being of children and to comply with these regulations. This Act also gives Tusla the authority to assess compliance with the regulations. The purpose of regulation in relation to early years services is to ensure that the care, safety, and well-being of children attending such services is upheld. Inspections of early years services are planned based on the following:

- Previous inspection history
- Any information received in relation to the service

The findings on inspection are based on:

- Information obtained through examination of documentation
- Direct observation

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- Discussion with relevant staff

This inspection was unannounced and focused on the area of governance and safety. The inspection may also focus on other areas as required.

The inspection focused on an examination of compliance under.

- Regulation 9 (1)(a)(b), (2)(a)(b)(c)(d), (4) - Management and recruitment.
- Regulation 11(1), (2), (8)(a) – Staffing Levels.
- Regulation 19(1)(a) – Health, Welfare and Development of child.
- Regulation 22 – Food and drink.
- Regulation 23 – Safeguarding health, safety and welfare of child.
- Regulation 25 (1), (2)(a)(b) – First aid.
- Regulation 28 – Insurance.

however, on inspection additional non-compliances were identified under:

- Regulation 8 – Notification of change in circumstances.
- Regulation 16(1)(i) – Records in relation to pre-school.
- Regulation 29(c), (d), (e) – Premises.

These findings are outlined within the relevant regulations within this report.

Inspection findings are documented in the inspection report which is first issued in draft format to the service with an opportunity to respond to any findings. Where statutory requirements are identified as not being met, the registered provider must demonstrate how they have rectified the non-compliance and will prevent any non-compliance from re occurring. The Corrective Action and Preventive Action plan (CAPA) will be used to inform decisions about compliance with regulatory requirements. Where the registered provider fails to meet the statutory requirements an escalation process may be commenced.

The inspectorate reserves the right to edit responses received for reasons including clarity, completeness and compliance with administrative and legal processes.

The contents of the report are compiled by the inspectorate body.

Additional Information

1. A written referral was sent to the Environmental Health Office on 27 May 2026.
2. A written referral was sent to the Chief Fire Officer in Offaly County Council on 27 May 2026.

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Acknowledgments

The inspector wishes to acknowledge the cooperation of the registered provider, person in charge, staff and children who were present on the day of the inspection.

Part II - Registration and Register

Regulation 8 - Notification of change in circumstances

(1) A registered provider of a pre-school service other than a temporary pre-school service shall, subject to paragraph (3), notify the Agency in writing of any proposed change in the details in relation to the pre-school service contained in the register pursuant to section 58C(2) of the Act or Regulation 7(2) at least 60 days before it is proposed that the change would take effect.

Non-Compliance Information

(1) The registered provider did not notify the Inspectorate of the change in person in charge in the service. The registered provider was the named designated person in charge for the service however the registered provider was also the named designated person in charge for the Celbridge service.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(1) Following the inspection, the management arrangements were reviewed. A new designated person in charge has been appointed for the Celbridge service, ensuring that the registered provider is no longer the designated person in charge for both services. The required notification regarding the change in person in charge has been submitted to the Inspectorate, and service records will be updated accordingly once the approval has been received. Ensure that the PIC of each service is different people

Supporting documentation submitted

(1) Screenshot of the online application.

Summary Comment

The written response and attached documentary evidence submitted by the registered provider has been assessed by the Early Years Inspectorate. The corrective action taken meets the regulatory requirement.

Part III – Management and Staff

Regulation 9 – Management and recruitment

(2) A registered provider shall ensure that each employee, unpaid worker and contractor is suitable and competent taking into consideration the nature of the needs of children, including by-

(a) consideration of references from the person's past employers, if any, and in particular the most recent employer, if any,

(b) consideration of references from reputable sources in the case of a person who has no past employers,

(c) consideration of the vetting disclosure received from the National Vetting Bureau of the Garda Síochána in accordance with the Act of 2012 in respect of the person, and

(d) ensuring, insofar as is practicable, that where a person has lived in a state other than the State for a period of longer than 6 consecutive months, he or she provides police vetting from the police authorities in that state.

(4) A registered provider shall ensure that, without prejudice to the generality of paragraph (2) and subject to paragraphs (5) and (6), each employee working directly with children attending the service holds at least a major award in Early childhood Care and Education at Level 5 on the National Qualifications Framework or a qualification deemed by the Minister to be equivalent.

Compliance Information

Following a review of previous inspection information, information available on inspection and discussion with the registered provider it was determined that one adult had been employed since the previous inspection. The file of the adult was reviewed.

(2)

(a)(b) Two written and verified past employer references or references from a reputable source other than a past employer, were available in respect of the adult employed whose staff file was reviewed.

(c) Garda Vetting disclosures were available for all adults working in the service. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.

(d) Not applicable as no adult had resided outside the state for a period of longer than 6 consecutive months whose records were reviewed.

(4) One adult employed to work directly with children attending the service and held at least a major award in Early Childhood Care and Education at Level 5 or higher on the National Framework of Qualifications.

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Part III – Management and Staff

Regulation 11 - Staffing levels

- (1) Subject to this Regulation, a registered provider shall ensure that there is at all times an adequate number of adults working directly with the children attending the pre-school service.*
- (2) Subject to paragraphs (4) and (5), a registered provider of a full day care service or a part-time day care service shall ensure that at all times the minimum ratio of adults to children specified in column (3) of Part 1 of Schedule 6 opposite a particular reference number specified in column (1) of that Part in respect of the age range of the children specified in column (2) thereof at that reference number is satisfied.*
- (8) Without prejudice to paragraphs (2) to (7)-*
- (a) a registered provider of a pre-school service other than a child-minding service or a sessional pre-school service shall ensure that there are at least 2 adults on the premises at all times,*

Compliance Information

- (1) There were thirty-five children attending the service and they were supervised directly by four adults.
- (2) The minimum ratio of adults to children was adhered to during the day.
- (8)(a) There were at least two adults on the premises at all times for the duration of the Inspection.

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Part IV – Information and Records

Regulation 16 – Record in relation to pre-school service

(1) A registered provider shall ensure that a record in writing is kept of the following information in relation to the service:

(i) details of staff rosters on a daily basis;

Non-Compliance Information

(1)(i) There was no staff roster maintained in the service.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(1)(i) Staff roster is on the noticeboard of the office.

Supporting documentation submitted

(1)(i) Staff roster for service.

Summary Comment

The written response and documentary evidence submitted by the registered provider has been reviewed by the Early Years Inspectorate. The corrective action taken meets the regulatory requirement. The practice as stated will be reviewed on the next inspection.

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Part V - Care of Child in Pre-school Service

Regulation 19 - Health, welfare and development of child

(1) A registered provider shall, in providing a pre-school service, ensure that-

(a) each child's learning, development and well-being is facilitated within the daily life of the pre-school service through the provision of the appropriate activities, interaction, materials and equipment, having regard to the age and stage of development of the child, and

Compliance Information

Basic needs of children:

The staff sat with the children at mealtimes and engaged them in conversation. Mealtimes were relaxed and unhurried. The children's toileting and nappy changing care requirements were responded to promptly when required. It was handled in a sensitive and positive manner.

There was no child sleeping on the day of the inspection however the staff members reported that individual sleep needs of the children were met.

The adults working with the children were sensitive and responsive in promoting positive behaviours. Children's first names, appropriate eye contact and gentle vocal tones were observed being used by the staff members during interactions. There was a predictability to the children's day which they were familiar with. The children were observed to go outdoors for play during the morning. Sun cream and sun hats were worn by the children as it was a hot sunny day; the staff also brought water for the children to drink when outside if thirsty or warm and was easily accessible.

Supporting relationships around children:

Staff members were observed being respectful and kind towards the children in their care.

The service had an open-door policy for parents. Information was shared with parents and guardians at the drop off and collection times. A closed electronic communication system is used for communication purposes also with parents. Face to face meetings with parents can be organised as needed by the registered provider. Monthly team meetings are held in the service.

Physical and material environment:

The children were observed seated at tables engaged in tabletop activities supported by the staff members in Room 1. They rotated between the four tables of various activities. The rest and library areas in both rooms and the natural materials area in Room 1 were well presented as invitations for play for the children.

The outdoor area was located at the rear of the premises with access via room 2. Equipment included a climbing dome, a wooden shaky bridge, a wooden house used for shelter and rest, small slides and a sand box.

Non-Compliance Information

Physical and material environment:

Room 1

1. It was observed that activities were adult led rather than enabling the children to be independent to make choices and decisions about their play.
2. The physical and material environment in Room 1 required to be reviewed to ensure that these areas are presented and adequately resourced to enable the children to engage in child led imaginative play. There was a play kitchen, and shop carcass which had a small number of associative toys available. This limited the play value in these interest areas, and the children were observed to not play with them.
3. Dress up clothes were observed in a metal basket in another part of the room rather than hung up on a rail to assist children's choice.
4. There was no mark making area, paint and paper, art and crafts or open ended materials available to the children to provide child led creative opportunities.
5. A large storage unit had trays of various play toys including trains and train track set, plastic and wooden building blocks, small world animals, cars and trucks however they were not taken out or put on top of the storage unit as an invitation to play. The children were not observed to play with them.
6. A tuff tray was available for sensory play but was not used. There was no sensorial play available to the children in the room on the inspection. It is acknowledged that a messy play ice cream activity had been provided earlier in the service however it was tidied away and no other sensory play material was available for the remainder of the morning.

Room 2

7. It was observed that there was no mark-making area with paper/crayons available for the children to readily access; the staff member advised the inspector the crayons were stored in a closed cupboard in the pre-school room. It is acknowledged the adults provided the children with colouring templates and crayons after dinner.
8. The interest area containing a wooden shop unit was observed with no associative play equipment and the wooden play kitchen was observed with minimal associative props to encourage the children to use the space for creative and imaginary and meaningful play. It is acknowledged a container of wooden play food items were brought to the room mid-morning; however, the container was placed in a storage unit at the other side of the room and not organised in or close to these areas to promote invitations for the children to play.

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Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

Toys were being sterilised that morning and returned to the appropriate areas once the sterilising was complete.

A clothes rack has now been moved into each classroom where the children can access the dress up clothes.

Painting and creatives expression are a regular and consistent feature of our provision and are generally available within the environment on a daily basis.

The storage unit which we have placed in the middle of the floor space is easily accessible to the children throughout the day. We have always believed that allowing the children to choose, retrieve, and put away their toys is a fundamental pillar of early childhood education. Choosing a tray, carrying it to a play space, and deciding when they are finished gives children a sense of agency and control over their learning environment.

On the morning of inspection, an extended sensory play experience had taken place across the environment including both construction and role play themes.

Crayons, paper and mark making material readily available for the children to participate with.

We will ensure that the toys continue to be available as usual when not being sterilised.

Supporting documentation submitted

Photograph of art station.

Photograph of dress up clothes on coat stand.

Two photographs of kitchen play units with props in baskets.

Summary Comment

The written response and photographic evidence submitted by the registered provider has been reviewed by the Early Years Inspectorate. The corrective actions taken meet the regulatory requirements. The practices as stated will be reviewed on the next inspection.

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Part V - Care of Child in Pre-school Service

Regulation 22 – Food and drink

A registered provider shall ensure that adequate and suitable, nutritious and varied food and drink is available for each pre-school child attending the pre-school service.

Compliance Information

- There was a healthy eating policy in the service.
- The service does not provide food for children attending the service with the exception of the 'Bia Blasta preschool food nutrition programme'. Parents / guardians supply food daily for the children attending on a sessional, part time and full day care basis.
- The service as part of the 'Bia Blasta preschool food nutrition programme' provided the snack for the children attending the Early Childhood Care and Education programme.
- Six children brought their own snacks which were observed to be healthy and included sandwiches, yogurts, fruit, cheese and crackers. The remaining twelve children in Room 1 under the supervision of the staff members, self-served from platters containing ham, buttered crackers, sweetcorn, cucumber, bread sticks and apple pieces. Appropriate plates and cups were available for the children to use. Additional portions were available to the children who chose to have a second helping.
- Of the eleven children attending on a full day care basis, three children were observed to eat a hot meal that was adequate and suitable.

Non-Compliance Information

1. It is acknowledged some of the children attending Rooms 1 and 2 did have fresh fruit pieces, a selection of sandwiches with healthy fillings, yoghurts and cheese, provided for snack from home, however, the registered provider did not ensure that suitable and nutritious food was being provided for each child attending the service as observed by the following:

- In Room 2, ten children were observed with a high sugar content snack in their lunch box, for example, foods observed included chocolate spread on bread or crackers, chocolate biscuits, pain au chocolat, chocolate mini muffins, chocolate chip muffin, cake and an iced donut.

This was at variance with the health eating policy which states that the service "does not allow chocolate."

2. The registered provider did not ensure that all children attending on a full day care basis were provided with a hot meal. Examples of the foods provided for the main meal for individual children was observed to include:
 - One child had a sandwich, banana and water, one child had two brioche rolls, one child had crackers, cheese, apple pieces, a yogurt and chocolate buttons.

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- One child was observed eating reheated tinned spaghetti hoops in tomato sauce while another child was observed eating reheated tinned alphabet type spaghetti in tomato sauce.

This was at variance with healthy eating policy for the service which states that “meals and snacks should be... healthy for children.”

This was a non-compliance following inspection conducted on 4 December 2025. The corrective action submitted by the registered provider following the inspection failed to prevent recurrence of this non-compliance.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

All parents have been informed in writing of the requirements to provide a balanced hot meal that is appropriate for their child’s age and nutritional needs. Guidance has been issued to parents outlining examples of suitable hot meals and foods that meet healthy eating recommendations.

We will continue to remind parents of our healthy eating policy and sent home brochures from Offaly County Childcare Committee regarding healthy eating on 19th June 2026. Communication regarding the healthy eating policy was sent on the 23rd June 2026. This also included information about the hot meals.

We will remove any unhealthy items from their lunch boxes and place it back in their bag to go home with them.

We will also continue to remind parents of our healthy eating policy regularly.

Staff now check lunchboxes daily to ensure children have an appropriate hot meal. Where a meal provided is not considered adequate, staff will discuss this sensitively with parents and offer guidance for future lunches. A record will be maintained of any concerns regarding inadequate meals and the actions taken to support families.

A team meeting was completed with staff which included our healthy eating policy.

Supporting documentation submitted

Screenshot of messaging to parents x 3.

Agenda item on team meeting minutes dated 23 June 2026.

Daily Room Checklist & Compliance Log.

Summary Comment

The written response, documentary and photographic evidence submitted by the registered provider has been reviewed by the Early Years Inspectorate. The corrective actions taken meet the regulatory requirements. The practices as stated will be reviewed on the next inspection.

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Part VI - Safety

Regulation 23 - Safeguarding health, safety and welfare of child

A registered provider shall ensure that all reasonable measures are taken to safeguard the health, safety and welfare of a pre-school child attending the service and that the environment of the service is safe.

Compliance Information

General Safety:

The main entrance door was secure to ensure the safety of the children within. The outdoor area at the rear and side of the premises was secured by high perimeter wall and gates either side. The service met the necessary safety requirements in respect of the indoor environment, toys and equipment and the safe storage of cleaning agents.

The inspectors signed the visitor log on arrival.

The staff members were aware of the potential choking risks that grapes posed when asked by the inspectors.

They also said that they would remove any beaded necklace if observed that a child may be wearing them.

Daily indoor and outdoor environmental risk assessments were completed for Rooms 1 and 2.

Infection Control:

Thermostatically controlled hot water, liquid hand soap and paper towels were readily available for hygienic hand washing and drying. The staff members supervised children's handwashing. Foot pedal operated bins were provided for the disposal and containment of used tissues and paper hand towel. Facilities were available for nappy changing. Cleaning schedules were maintained for the room environments which were observed to be clean and tidy.

Administration of Medication:

Medicine was not given at the time of the inspection; written parental consent was available should medication be required to be administered to a child. The staff members were familiar with required practices when administering medication in the service.

Safe Sleep:

There were no children attending who required sleep on the day of the inspection. Six low-level bed and appropriate bed linen was available for any child who required sleep. The staff members demonstrated knowledge of the care of sleeping children in response to questions asked by the inspector. A sleep record book was available to record sleep observations

A rest area was available for the children in the two care rooms if they wished to take a break from activities and rest.

Fire Safety:

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Monthly fire drills had been carried out, and staff members were familiar with fire safety evacuation procedures from the service. The fire exits were not blocked.

Outing:

The person in charge confirmed that the service conducts outings. An outings policy was available.

Non-Compliance Information

General Safety:

1. The cupboard under sink in the sanitary area used by Room 2 was not secured. An aerosol container of shaving gel and a large plastic bag containing nappies were observed. *This was a non-compliance following inspection conducted on 4 December 2026. The corrective action submitted by the registered provider following the inspection failed to prevent recurrence of this non-compliance.*
2. The heating boiler for the heating system in the service located in the children's outdoor play area; this was accessible to the children and required to be blocked off.

Infection Control:

3. The facilities used to reheat and prepare food prior to serving to the children were located in the office. A written referral was sent to the Environmental Health Office.
4. The children's perishable snacks were not refrigerated in Rooms 1 and 2 despite a fridge being available. They remained in the children's bags.
This was a non-compliance following inspection conducted on 4 December 2025. The corrective action submitted by the registered provider following the inspection failed to prevent recurrence of this non-compliance.
5. The nappy change mat was torn, and the inner foam was exposed which was not suitable for infection control purposes.
6. A roll of paper was placed on the work surfaces and not in the wall mounted dispensers provided in the two sanitary areas for the service and Room 2 for the hygienic dispensing of paper towels. It is acknowledged the registered provider placed the roll of paper towel into the dispenser in Room 1 sanitary area when it was brought to their attention.
This was a non-compliance following inspection conducted on 4 December 2025. The corrective action submitted by the registered provider following the inspection failed to prevent recurrence of this non-compliance.
7. The wooden window ledges were absent from both windows in Room 2 exposing the cement blocks and foam filler on one window and the plaster work exposed on the second window. This area could not be adequately cleaned.

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Administration of Medication:

8. There was no temperature reducing medication available in the service to manage a child's raised temperature should it occur and a parent/guardian not immediately available to collect the child.

Fire Safety:

9. The door in Room 2 used as the primary fire evacuation route could not be opened or closed easily as the door was too large for the door frame and required some force to close it.

A written referral was sent to the Chief Fire Officer in Offaly County Council

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. A suitable lock has been installed on the press to ensure it remains securely locked at all times. Daily health and safety checks have been updated to include checking that all storage presses and cupboards containing potentially hazardous items are securely locked. All staff have been reminded of their responsibilities to ensure storage areas are secured throughout the day.
2. A permanent protective barrier has been installed to prevent children from accessing the heater boiler. Risk assessments for the outdoor play area have been reviewed and updated to include the heating boiler and other fixed equipment that may pose a risk to children.

Infection Control:

3. A separate kitchen area has been constructed and is now used exclusively for the preparation and reheating of children's food. All food preparation and reheating activities has been moved from the office to the dedicated kitchen, ensuring that food is prepared in a suitable, hygienic environment.
4. Following the inspection, staff were reminded that all perishable snacks brought in by parents must be placed in the fridge immediately upon the child's arrival. This procedure has been implemented in rooms 1 & 2 to ensure that perishable food is stored safely until required. The daily room routine has been updated to include checking and placing all perishable food items in the designated fridge.
5. The nappy changing mat was removed from use immediately and replaced with a new, intact, wipe-clean nappy changing mat that is suitable for effective cleaning and infection prevention and control. The bathroom checklist to include the assurance that the changing mat is in good condition.
6. The bathroom checklist has been updated to ensure this is included. The team meeting held on 23rd June – discussion with staff regarding the importance of ensuring the paper towels are dispensed at all times

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7. The missing wooden window ledges in Room 2 were replaced. The exposed cement blocks, foam filler, and plasterwork around both windows were repaired and finished to a smooth, sealed surface. The new window ledges were securely fitted, and all surrounding areas were made fully cleanable. The room was cleaned following completion of the repairs. The person in charge will carry out regular environmental and infection prevention audits to ensure all equipment remains in good condition and is suitable for safe use.

Administration of Medication:

8. Temperature-reducing medication appropriate for children has been purchased and is now available within the service for use in accordance with the service's medication administration policy and with prior parental consent. The medication has been stored securely and is monitored to ensure it remains within its expiry date. The medication audit checklist will be completed and communicated to the person in charge to purchase any items which are required.

Fire Safety:

9. The door in Room 2, which serves as the primary fire evacuation route, was assessed and adjusted to ensure it opens and closes freely without the need for excessive force. The door and frame were repaired to provide unobstructed access and safe egress in the event of an emergency. Following the repair, the door was tested to confirm it operated correctly.

Supporting documentation submitted

General Safety:

1. Photo of locked press in sanitary area.
2. Photo of heating boiler in outdoor area.

Infection Control:

3. Team meeting minutes regarding refrigeration of snacks. Daily room checklist and compliance log.
4. Photograph of kitchen and prepping station.
5. Photograph of replacement baby changing mat. Prompt on the bathroom notice. Daily room checklist and compliance log.
6. Photograph of paper dispenser.
7. Two photographs of the repaired windowsills.

Administration of Medication:

8. Photograph of the two bottles of fever reducing medication. Medication audit checklist document.

Fire Safety:

9. Maintenance checklist. Daily room checklist and compliance log.

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Summary Comment

The written response, documentary and photographic evidence submitted by the registered provider has been reviewed by the Early Years Inspectorate. The corrective actions outlined meet the regulatory requirements. The practices as stated will be reviewed on the next inspection.

Part VI - Safety

Regulation 25 - First aid

(1) A registered provider shall ensure that a person trained in first aid for children is, at all times, immediately available to the children attending the pre-school service.

(2) A registered provider shall ensure that a suitably equipped first aid box for children-

(a) is safely stored in an easily accessible and conspicuous position on the premises, and

(b) is available to the children attending the pre-school service at all times.

Compliance Information

(2)

(a) The first aid equipment was safely stored in Room 1.

(b) A suitably equipped first aid box for children was available at all times to the adults caring for the children in each care room.

Non-Compliance Information

(1) There was no person trained in First Aid Response (FAR) training on the premises and immediately available to the children between the hours of 7:30am – 8:00am and 17:00 – 18:00 hours. *This was an area of non-compliance following inspection conducted on 4 December 2026. The corrective action submitted by the registered provider following the inspection failed to prevent recurrence of this non-compliance.*

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(1) All staff members have been booked to attend First Aid training on 1st August 2026. On successful completion of the training, all staff will hold a FAR qualification. A training matrix will be maintained to monitor certification expiry dates and ensure refresher training is completed in advance, supporting ongoing compliance with regulatory requirements. PIC currently holds a CFR Certificate and is on site between the hours referenced.

Supporting documentation submitted

CFR Training booking.

Checklist for first aid resources.

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Summary Comment

The written response and documentary evidence submitted by the registered provider has been reviewed by the Early Years Inspectorate. The corrective and preventive action outlined meets the regulatory requirement.

Part VI - Safety

Regulation 28 - Insurance

A registered provider shall ensure that the pre-school service is adequately insured.

Compliance Information

There was evidence of current insurance cover valid until 27 March 2027. The insurance provided cover for 44 children.

Part VII - Premises and Space Requirements

Regulation 29 - Premises

A registered provider shall ensure that the premises of the service are-
(e) equipped with adequate and suitable sanitary facilities.

Non-Compliance Information

(e)

1. There was no wash hand basin available for the nappy change area.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

There was no corrective and preventive action submitted.

Supporting documentation submitted

There was no supporting documentation submitted.

Summary Comment

Regulatory compliance is not met for regulation 29(e). The registered provider has submitted a change in circumstance application dated 12 July, a fit for purpose inspection will be required once documentation requested from the registered provider by the registration office has been received and the application accepted for review. Regulation 29(e) will be assessed as part of the pre-registration change in circumstance inspection.